Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512)463-5800 1-800-325-8506 FORM C/OH **CANDIDATE / OFFICEHOLDER** 6974 **CAMPAIGN FINANCE REPORT** COVER SHEET PG 1 2 PAGE# ACCOUNT # The C/OH INSTRUCTION GUIDE explains how to complete this form. (Ethics Commission filers) 1 of 4 12312005 CANDIDATE / MS / MRS / MR FIRST OFFICE USE ONLY **OFFICEHOLDER** RON NAME Date Received NICKNAME LAST SUFFIX **DAVIS** CANDIDATE / ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE **OFFICEHOLDER** P.O. Box 16665 MAILING **ADDRESS** Austin, TX 78761 Date Hand-deffvered or Date Postmarket Change of Address Receipt # Amount MS / MRS / MR CAMPAIGN TREASURER Date Processed Louis NAME Date Imaged SUFFIX NICKNAME LAST Simms STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #: CITY: STATE: TREASURER 7501 Barcelona Drive **ADDRESS** Austin, TX 78752 (Residence or business) AREA CODE PHONE NUMBER EXTENSION CAMPAIGN **TREASURER** (512) 453-5322 PHONE **8** REPORT TYPE January 15 30th day before election 15th day after campaign treasurer appointment (officeholder only) Runoff July 15 8th day before election Exceeded \$500 limit Final report (Attach C/OH - FR) 9 PERIOD Month Day Month Day THROUGH COVERED 09/26/2008 10/25/2008 ELECTION DATE 10 ELECTION **ELECTION TYPE** Dav Primary Runoff General Special 11/04/2008 OFFICE HELD (if any) Travis Co Commissioner Pct 1 11 OFFICE OFFICE SOUGHT (if known) Travis Co Commissioner Pct 1 13 NOTICE Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. OF DIRECT Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. CAMPAIGN **EXPENDITURE** Name **BY OTHER INDIVIDUALS** Address/PO Box: Apt. / Suite #: City; Zip Code additional pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT:

P.O. Box 12070

FORM C/OH

14 C/OH NAME DAVI	S, RON		15 ACCOUNT # 12312005	(Ethics Commission filers)
16 NOTICE FROM	This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures			
POLITICAL COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		
additional pages				
		COMMITTEE CAMPAIGN TREASURER ADDRESS	· · · · · · · · · · · · · · · · · · ·	
17 CONTRIBUTION TOTALS	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED			0.00
	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)			0.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED		SED \$	0.00
	4. TOTAL POLITICAL EXPENDITURES		\$	4,161,22
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			53,131.26
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF T AY OF THE REPORTING PERIOD	THE \$	0.00
18 AFFIDAVIT		I swear, or affirm, under pen is true and correct and include me under Title 15, Election (des all information requir	
M	FELICITAS B. CHAVEZ Y COMMISSION EXPIRES December 6, 2010	July	f Candidate or Officehol	ider
AFFIX NOTARY S	STAMP / SEAL ABOV	Dr. David	, this the - <u>C</u>	27th down
Δ		rtify which, witness my hand and seal of office.	, this the - <u>C</u>	<u>ay</u> day
		· .		

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800 1-800-325-8506 POLITICAL EXPENDITURES SCHEDULE F PAGE# The INSTRUCTION GUIDE explains how to complete this form. Schedule: 1/2 Report: 3/4 (Ethics Commission filers) 3 ACCOUNT# 2 FILER NAME DAVIS, RON 12312005 Date Amount Payee name Coamerica Bank (\$) 10/14/2008 \$6.50 6 Payee address; City; State; Zip Code P.O. Box 75000 Dallas, TX 48275 Purpose of payment (See instructions regarding type of information 9 * Complete if direct expenditure to benefit Candidate/Officeholder Candidate / Officeholder name: required.) Service Charges Office sought: (if travel outside of Texas, complete Schedule T) Office held: Date Payee name Amount FedEx Office (\$) 10/24/2008 \$38.15 Payee address; City; State; Zip Code 8222 Burnet Rd Ste 101/102 Austin, TX 78758-5251 Purpose of payment (See instructions regarding type of information ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: required.) Copies Office sought: Office held: (If travel outside of Texas, complete Schedule T) Date Amount Payee name (\$) Office Max 10/06/2008 \$66.57 Payee address; City; State; Zip Code 12625 North IH 35 Austin, TX 78753 Complete if direct expenditure to benefit Candidate/Officeholder ** Purpose of payment (See instructions regarding type of information Candidate / Officeholder name: required.) Copies Office sought: (If travel outside of Texas, complete Schedule T) Office held: Date Payee name Amount (\$) Simms, Louis 10/17/2008 \$550.00 Payee address; City; State; Zip Code 7501 Barcelona Drive Austin, TX 78752-2006 Purpose of payment (See instructions regarding type of information ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: required.)

Office sought:

Office held:

Appreciation for Volunteering as Campaign Treasurer

(If travel outside of Texas, complete Schedule T)

1-800-325-8506 **Texas Ethics Commission** P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800 POLITICAL EXPENDITURES SCHEDULE F PAGE# The INSTRUCTION GUIDE explains how to complete this form. Schedule: 2/2 Report: 4/4 (Ethics Commission filers) 3 ACCOUNT# 2 FILER NAME DAVIS, RON 12312005 Date Payee name **Amount** Travis County Democratic Party (\$) 10/02/2008 \$1,000.00 6 Payee address; City; State; Zip Code P.O. Box 684263 Austin, TX 78768-4263 9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Purpose of payment (See instructions regarding type of information Candidate / Officeholder name: required.) Donation Office sought: (If travel outside of Texas, complete Schedule T) Office held: Date Payee name Amount Travis County Democratic Party (\$) 10/23/2008 \$1,500.00 Payee address; City; State; Zip Code P.O. Box 684263 Austin, TX 78768-4263 Purpose of payment (See instructions regarding type of information ** Complete if direct expenditure to benefit Candidate/Officeholder ** required.) Candidate / Officeholder name: **Donation** Office sought: (If travel outside of Texas, complete Schedule T) Office held: Date Amount Pavee name (\$) Valinda Bolton Campaign 10/17/2008 \$1,000.00 Payee address; City; State; Zip Code P.O. Box 843 Austin, TX 78767 ** Complete if direct expenditure to benefit Candidate/Officeholder Purpose of payment (See instructions regarding type of information Candidate / Officeholder name: required.) Campaign donation Office sought: (If travel outside of Texas, complete Schedule T) Office held: